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| 1 | | | |
| 2 | Attorney General of the State of California DANE R. GILLETTE | | |
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| 10 | IN THE UNITED STATES DISTRICT COURT | | |
| 11 | FOR THE NORTHERN DISTRICT OF CALIFORNIA | | |
| 12 | SAN FRANCISCO DIVISION | | |
| 13 | | MMC (PR) | |
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| 16 | 16 | | |
| | DERRAL ADAMS. Warden. | | |
| 17 | | | |
| 17 18 | 17 Respondent. | | |
| | 17 Respondent. | | |
| 18 | 17 Respondent. 19 | AIL | |
| 18 19 | Respondent. 18 19 20 DECLARATION OF SERVICE BY U.S. MA | AIL | |
| 18 19 20 | Respondent. Respondent. DECLARATION OF SERVICE BY U.S. MA 21 | AIL | |
| 18 19 20 21 | Respondent. DECLARATION OF SERVICE BY U.S. MA DECLARATION OF SERVICE BY U.S. MA DECLARATION OF SERVICE BY U.S. MA | AIL | |
| 18 19 20 21 22 | Respondent. DECLARATION OF SERVICE BY U.S. MA DEC | AIL | |
| 18 19 20 21 22 23 | Respondent. 18 | AIL | |
| 18 19 20 21 22 23 24 | Respondent. 18 | AIL | |
| 18 19 20 21 22 23 24 25 | Respondent. 18 | AIL | |
| 18 19 20 21 22 23 24 25 26 | Respondent. 18 | AIL | |

DECLARATION OF SERVICE BY U.S. MAIL

Muhammad v. Adams, Warden Case Name:

No.: C 07-3627 MMC (PR)

I declare:

I am employed in the Office of the Attorney General, which is the office of a member of the California State Bar, at which member's direction this service is made. I am 18 years of age or older and not a party to this matter; my business address is 455 Golden Gate Avenue, Suite 11000, San Francisco, CA 94102-7004.

On February 25, 2008, I served the attached MOTION TO DISMISS PETITION FOR WRIT OF HABEAS CORPUS AS UNTIMELY by placing a true copy thereof enclosed in a sealed envelope with postage thereon fully prepaid, in the United States Mail at San Francisco, California, addressed as follows:

Malik Ali Muhammad V-37398 Facility A, Building 1/Z206L P.O. Box 5248 Corcoran, CA 93212

I declare under penalty of perjury under the laws of the State of California the foregoing is true and correct and that this declaration was executed on February 25, 2008, at San Francisco, California.

| S. Agustin | /s/ S. Agustin |
|------------|----------------|
| Declarant | Signature |

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